

**TranspARTation Grant  
FY2012 Final Report Form**

***Deadline: 30 days after completion of the field trip***

Grant #: \_\_\_\_\_

School Name: \_\_\_\_\_  
Contact person for this report: \_\_\_\_\_  
Contact's phone number: \_\_\_\_\_  
Contact's e-mail address: \_\_\_\_\_  
Activity begin date: \_\_\_\_\_ End date: \_\_\_\_\_  
Number of students who benefitted from the program: \_\_\_\_\_

**Financial Report**

*Please ensure that all grant funds are accounted for.*

Grant amount received from Kentucky Arts Council: \_\_\_\_\_  
Amt. of funds spent on transportation to arts venue: \_\_\_\_\_

**Narrative Report**

*Please use a maximum of two pages to respond to this item and attach it to this final report form.*

Briefly describe the field trip. What was the arts experience? Please address how the students and school benefited from the program, how you measured the impact of the program on all participants (teachers and students), and how the trip will continue to be used throughout the school year. You may include any additional evidence of the impact of the TranspARTation Grant such as pictures, newspaper articles or student responses.

Please also include any comments about the organization's programming at the end of your narrative.

Evaluate the organization's programming on a scale of 1 (low) to 5 (exemplary): **1 2 3 4 5**

- How the educational programs enhanced or broadened your students' experience
- Use of quality educational materials

*I certify that I am legally authorized to submit this report on behalf of the grantee and that the foregoing statements and enclosures are true and complete to the best of my knowledge. **All signatures must be in RED ink.***

Preparer's Typed Name: \_\_\_\_\_ Title: \_\_\_\_\_

Preparer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing address for final report:  
Kentucky Arts Council  
21st Floor, Capital Plaza Tower  
500 Mero Street  
Frankfort, KY 40601  
502-564-3757